

## State Budget Office - Address and Authorized Personnel Form

Agency Head:			Org. Number:	
Department/Bureau Name:				
Division Name:				
Street Address:				
Building #:	Suite/Room #	City/State/Zip:	Do you receive Interdepartmental Mail? (Check one)    YES _____    NO _____	
<b>*PLEASE NOTE THAT THE FIRST PERSON LISTED WILL BE OUR PRIMARY CONTACT FOR ALL MAILINGS.*</b>				
	<i>Authorized Personnel and Title:</i>	<i>Telephone #</i>	<i>FAX #</i>	<i>E-mail Address</i>
Authorized to receive: <b>APPROVED WV11'S</b>	1.* 2. 3. 4.			
Authorized to receive: <b>PERSONAL SERVICES PRINTOUTS</b>	1.* 2. 3. 4.			
Authorized to receive: <b>EXPENDITURE SCHEDULES/ APPROPRIATION REQUESTS/ MISCELLANEOUS BUDGET INFO.</b>	1.* 2. 3. 4.			
Authorized to receive: <b>PAYROLL INFORMATION</b>	1.* 2. 3. 4.			
<div style="display: flex; justify-content: space-between;"> <span>Date:</span> <span>Division Administrator's Signature:</span> </div>				
<div style="display: flex; justify-content: space-between;"> <span>Date:</span> <span>Department Secretary/Bureau Chief's Signature:</span> </div>				